

EXHIBIT 1
continued

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2 do recall the meeting.

3 Q. And you told Cathy Magone that you
4 had not seen any of your cases yet that day?

5 A. No, I didn't say that. What I said
6 was that I didn't have -- usually I had a
7 binder with all of the face sheets of each
8 patient who came in or each patient I was
9 following. And I would write on that face
10 sheet whatever work I was doing with them
11 because there were so many patients that it
12 was hard to keep track of them. You just
13 can't. They're in and out so quickly.

14 So I was organized in having it in
15 a binder. That particular day I was held up
16 and I didn't go to lunch til late, and I
17 grabbed lunch and then the length of stay
18 meeting was happening. And instead of going
19 back to my office and grabbing my binder with
20 all of my gear and all of my stuff in there
21 and my patient caseload, I just went up to
22 the meeting without it.

23 I had never done that before. I
24 could tell her who the cases were, some of
25 the cases I was working on, but I couldn't

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2 tell her all of them because I didn't have it
3 in front of me.

4 Nicole Serra or any one of the case
5 managers could not say who their patients are
6 without having a list of them in front of
7 them. That particular day I was rushing and
8 I didn't want to be late for her meeting, so
9 I didn't stop back at my office to get what I
10 needed.

11 Q. When you say face sheets, could you
12 describe the document for me?

13 A. Sure, it's a face sheet. When a
14 person is admitted to the hospital there's
15 the name, the address, all of the
16 demographics, all of the personal
17 information, a diagnosis, insurance
18 information. It's a face sheet on that
19 person.

20 We would get them through the fax
21 machine and that's how we would get who --
22 one way of receiving our patients. And I
23 would write on that sheet. You know, spoke
24 to the wife today, et cetera, or you know,
25 spoke to Visiting Nurse Service. So I could

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2 not enough, we would write front and back,
3 you know.

4 Q. During this length-of-stay meeting
5 where you didn't have your paperwork with
6 you, did you tell Cathy Magone that you had
7 not seen any of your patients yet that day?

8 A. I highly doubt that. What would I
9 be doing from 8 o'clock to 1 o'clock.

10 Q. Do you remember one way or another
11 whether you said that to her?

12 A. I don't believe I would say that
13 because I was there. I had to see patients.

14 Q. Do you recall a situation on or
15 about August 31st of '06 where the case
16 manager Suzanne complained that a family had
17 had not been properly prepared for entering
18 their -- the patient into a nursing home?

19 MS. NICAJ: Objection.

20 You can answer.

21 A. I wasn't aware of it until I read
22 the statement.

23 Q. Not until the litigation?

24 A. Yes, not aware of that at all.

25 Q. You don't know one way or another

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2 whether that situation happened?

3 A. I have no way of knowing.

4 Q. What's a PRI screening?

5 A. It's a patient review instrument.

6 You need training to do that. What it is,
7 it's a screening on a patient in order to get
8 them into a nursing home and they can't be
9 admitted to a nursing home without this PRI.

10 And the case managers, I think
11 there was only one who could do it, I was the
12 only other person who could do it. Nicole
13 did not have the training to do it. I had
14 set it up at some point but was not doing it
15 yet. So I had to do every PRI of every
16 patient who went into a nursing home.

17 Q. Approximately how many PRIs did you
18 need to do a day?

19 A. It varied. It varied from none to
20 maybe 10 in a day. Anywhere in between
21 there.

22 Q. Do you recall hearing from Cathy
23 Magone on or about September 1st that a case
24 manager named Collette had complained about
25 you're not completing a PRI as requested?

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2 MS. NICAJ: Objection.

3 You can answer.

4 A. Collette complained a lot about a
5 lot of things. For me to delineate when she
6 complained and what she complained about
7 would be very difficult for me. Collette
8 would pick up the phone and scream at me to
9 get there and do a PRI when the patient was
10 just about ready to leave, which was unfair
11 because the patient had been there for days,
12 and had she given me a heads-up, I would have
13 been able to do that in a timely manner.

14 So this is someone who enjoys
15 instant gratification. And so if I'm working
16 somewhere else, like in the ICU or in the ER
17 or on a unit with a family and she calls me,
18 I would jot it down as I did with every case
19 manager and then I would have to prioritize
20 which unit and which patient I would see
21 next.

22 So if she asked for a PRI and I
23 didn't run and jump, she would call Cathy
24 Magone and she would say I asked Carole to do
25 a PRI. She's not doing it, which is not

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2 true.

3 Q. Do you remember Cathy Magone
4 contacting you about that?

5 A. She probably did on an occasion or
6 two.

7 Q. Do you recall it?

8 A. Not in detail.

9 Q. Do you recall how you responded to
10 Cathy Magone?

11 A. I probably said that I was busy
12 doing something and that I would get to it,
13 which was my usual response. I didn't leave
14 my job at 4 o'clock. I usually stayed until
15 everything was done.

16 Q. What time did you normally leave
17 your job?

18 A. 4 o'clock. I was supposed to leave
19 at 4 o'clock.

20 Q. What time did you actually leave
21 your job?

22 A. I tried to leave at 4 o'clock.
23 Many days I was there until five or six. If
24 there was a PRI or anything that needed to be
25 done, I would stay and do it.

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2 Q. Did you ever hear about a situation
3 about a patient who was assigned to you was
4 discharged from the hospital without suitable
5 clothing?

6 A. Yes, I did.

7 Q. How did you hear about it?

8 A. I heard about it from Collette who
9 called me. I was in my office making phone
10 calls to patients, families and following up
11 on some things. It was, I would venture to
12 say, 3 o'clock, 3:30, which was kind of the
13 time I would wind down, go back to my office
14 and kind of clean up for the next day.

15 She called me to say that a patient
16 that I had met, I believe that day for the
17 first time, patient had been in the hospital
18 for several days, and I may be wrong, I may
19 have seen him the day before or maybe that
20 day, I'm not sure, but he was there for
21 several days. I didn't get the referral
22 until she called me and started screaming
23 that the man -- I got the referral. I saw
24 him. I saw him. I met with him.

25 We ascertained that he was going

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2 home. He was -- he had some psychiatric
3 problems. I ascertained that he was going
4 home. That a friend was going to pick him
5 up. I said is there anything you need,
6 anything that we can do for you.

7 He said no. He was a very
8 difficult patient and he was a very difficult
9 patient to work with. I looked at the side
10 of his dresser, he had a pair of pants and
11 shirt. He had his shoes. He was ready to
12 go.

13 So I went, I did my note. I went
14 back to my office. I get a screaming call
15 from Collette. Get over here. The patient
16 is leaving and he has no clothes on. So that
17 seemed to be something that was a priority.

18 So I went back to the unit. He was
19 sitting in front of the nurses' station in a
20 gown, in a nursing gown.

21 I said, "Where are you going like
22 that?"

23 He said, "I'm going home."

24 I said, "Where are your clothes?"

25 He said, "I don't want to wear

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2 clothes." I said -- we had a little chat.

3 And he left. His friend came and wheeled him

4 out. There wasn't much I could do.

5 First of all, I'm not responsible

6 for dressing patients. It's not my role to

7 do that. That's number one.

8 Number two, I can't make a person

9 put their clothes on. So he left. What I

10 was able to do for him, knowing he had a

11 psychiatric background, was I called Visiting

12 Nurse Service, and he had no insurance and he

13 had no money. I was able to get him Visiting

14 Nurse Service gratis, which is almost unheard

15 of. No one acknowledged that I did this, but

16 they acknowledged that I let him leave the

17 hospital without clothes, which is ludicrous.

18 Q. Which division of Visiting Nurse

19 Service did you contact?

20 A. Visiting Nurse, I believe, of

21 Westchester. I had called a few. I'm not

22 certain if that's -- I think it was

23 Westchester. It wound up to be Visiting

24 Nurse, or maybe Dominican Sisters. I'm not

25 sure. I was able to get the point across

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2 that this was someone who really needs some
3 after care and had no insurance and was there
4 some kind of slush fund that they had so they
5 could see him.

6 I've never done this in my career,
7 and I was able to get it for him. I was
8 never commended on that, but I was raked
9 across the coals for letting him leave
10 without clothes on.

11 Q. The registered nurse that had
12 attended the disaster mental health training
13 with you, Rita Barbieri --

14 A. I believe that's her name.

15 Q. Did she send you an e-mail about
16 the disaster mental health project in
17 September or October?

18 A. I don't recall.

19 Q. Let's back up to your interview
20 with Cathy Magone. You testified earlier you
21 believe that you remembered an interview in
22 approximately December of 2005?

23 A. It was actually December 1st.

24 Q. December 1, 2005?

25 A. Yes.

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2 Q. Is your daughter familiar with the
3 medical treatment you received after your
4 termination?

5 A. Yes.

6 Q. Is she familiar with the medication
7 were you prescribed?

8 A. Yes.

9 Q. As far as you know, is the basis of
10 her knowledge what you told her?

11 A. Yes.

12 Q. Did you have trouble adjusting to
13 the case management model that had been
14 implemented at Lawrence Hospital?

15 A. In the beginning I did.

16 Q. In what regards did you have
17 trouble adjusting to the model?

18 A. Not understanding whose roles it
19 was to do certain things and the model was
20 different from the model that we used when I
21 was there prior.

22 Q. Did you have trouble adjusting to
23 the time constraints associated with the case
24 management model?

25 MS. NICAJ: Objection.

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2 A. I didn't give it any thought. I
3 had no reason to think about that.

4 Q. You recommended Nicole Serra to be
5 hired as a social worker at Lawrence
6 Hospital?

7 A. Yes.

8 Q. Did you take any steps to recruit
9 Nicole Serra?

10 A. I didn't. I told Nicole there was
11 a position available. I knew that Nicole
12 didn't want to work at Phelps anymore. I
13 gave Cathy Magone her name and her number,
14 and I told Nicole Serra that I was not
15 promising her anything. That I didn't -- I
16 was not the one to hire her. That it was
17 Magone's decision, and that's where I left
18 it.

19 Q. Did you participate in the
20 interview of Nicole Serra?

21 A. I did not.

22 Q. What was your understanding of what
23 Nicole Serra's job at Lawrence would be?

24 A. She would be a hospital social
25 worker who would report to me as the senior

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2 social worker. And she would do the same
3 duties that I would do after being trained.

4 Q. What was her job title?

5 A. I think social worker.

6 Q. Did you consider yourself Nicole
7 Serra's supervisor while the two of you
8 worked at Lawrence together?

9 A. Yes.

10 Q. Did you have the authority to
11 adjust Nicole Serra's rate of pay?

12 A. No.

13 Q. Did you have the authority to
14 approve her request for time off?

15 A. She gave them to me and then I gave
16 them to Magone.

17 Q. Or to Diane Lance at the time?

18 A. Yes, or to Diane Lance at the time.

19 Q. When you gave those requests to
20 Ms. Lance or Ms. Magone, did you make any
21 comment or recommendations about whether you
22 thought the request for time off should be
23 approved?

24 A. No, that was at their discretion.

25 Q. Did you have the authority to issue

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2 other a lot also, if I was out or if she was
3 out.

4 Q. Did she learn her job well at
5 Lawrence Hospital while you were there?

6 A. She learned it fairly well. It's
7 the type of job that you learn on the job.
8 It's not something you can really -- it's as
9 things come up, that's how you deal with
10 them.

11 Q. Did you have occasion to observe
12 Nicole Serra's working relationship with
13 Maura Del Bene?

14 A. On occasion.

15 Q. How would you characterize it?

16 A. Maura and --

17 Q. Ms. Serra.

18 A. It was amicable. It was
19 professional. I observed that Nicole would
20 ask her a lot more questions than I would ask
21 her, but I knew the answers to some of the
22 things that she was asking her. She was very
23 curious and willing to learn and wanting to
24 learn, so she would align herself with Maura
25 and I thought it was wonderful. If she could

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2 Q. Is your daughter familiar with the
3 medical treatment you received after your
4 termination?

5 A. Yes.

6 Q. Is she familiar with the medication
7 were you prescribed?

8 A. Yes.

9 Q. As far as you know, is the basis of
10 her knowledge what you told her?

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12 Q. Did you have trouble adjusting to
13 the case management model that had been
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19 was to do certain things and the model was
20 different from the model that we used when I
21 was there prior.

22 Q. Did you have trouble adjusting to
23 the time constraints associated with the case
24 management model?

25 MS. NICAJ: Objection.

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2 A. No, because I made the assignments.

3 Q. Do you believe you received less
4 pay than other people because of your age?

5 A. No.

6 Q. Did you receive the same benefits
7 in terms of employment as other employees in
8 your approximate field?

9 A. Yes.

10 Q. Did anyone call you or anyone else
11 of your approximate age, any word or name
12 that you found offensive?

13 A. No.

14 Q. Aside from what you testified to
15 about Cathy Magone's comments in that meeting
16 in August, did anyone say anything to you
17 that made you believe you were being treated
18 differently because of your age?

19 A. No.

20 Q. Did anyone show you any pictures or
21 cartoons that you found offensive?

22 A. No.

23 Q. Did anyone tell you any jokes about
24 age that you found funny or offensive?

25 A. I found funny. I don't know that

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2 they were particularly about age, but --

3 Q. Was there anything in Cathy
4 Magone's words or behavior that made you feel
5 that you were singled out because of your age
6 other than the comment that she made to you
7 in that meeting?

8 A. No, I can't say so.

9 Q. Did anyone else tell you something
10 about Cathy Magone that made you believe she
11 was treating you differently because of your
12 age?

13 A. No.

14 Q. Do you know whether your position
15 was filled after you were fired?

16 A. I have no idea.

17 Q. Did your pay or benefits change
18 when you complained to Pat Orsaia about Cathy
19 Magone's comments?

20 A. No.

21 Q. Did anyone make any comments to you
22 that made you believe that your complaint to
23 Pat Orsaia was the cause of any change in
24 treatment you were receiving?

25 A. Can you repeat that, please.

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2 MR. KEIL: Can you read it back?

3 (Whereupon, the requested portion
4 was read back by the court reporter.)

5 A. It wasn't verbal, no.

6 Q. Did anyone else tell you that they
7 had witnessed something that made them
8 believe your termination was motivated by the
9 fact that you had complained to Pat Orsaia?

10 A. At Lawrence Hospital?

11 Q. Yes.

12 A. Ms. Dandridge.

13 Q. What did Ms. Dandridge say?

14 A. That it sounded like it was
15 retaliatory.

16 Q. When did she say that?

17 A. Maybe a week after I was
18 terminated. Days to a week. I'm not sure.
19 I had no contact with anyone once I left.

20 Q. Did Ms. Dandridge tell you why she
21 thought it sounded retaliatory?

22 A. Because the proximity of the time
23 of my complaint and when I was let go.

24 Q. Is that all she said?

25 A. Yes.

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2 Q. When you negotiated the job title
3 of senior social worker with Cathy Magone,
4 you did not consider the use of the word
5 senior to be offensive or discriminatory, did
6 you?

7 A. No.

8 MS. NICAJ: Objection.

9 You can answer.

10 A. No.

11 Q. If Cathy Magone had explained her
12 decision by saying that Nicole Serra was more
13 junior and that the assignment was more
14 appropriate for that reason, would you have
15 been offended?

16 MS. NICAJ: Objection.

17 A. That's not the basis for giving
18 someone a job because they're, you know, no,
19 I mean because she was more junior? Yeah, I
20 would have been offended.

21 Q. Would you believe that it was age
22 discrimination?

23 A. Yes.

24 MS. NICAJ: Objection.

25 You can answer.

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2 A. Yes.

3 Q. Do you believe that there are some
4 situations where it can be more appropriate
5 for a manager to assign something to a more
6 junior employee rather than to a more
7 experienced employee?

8 MS. NICAJ: Objection.

9 You can answer.

10 A. Yes. It doesn't negate the fact
11 that she said she's younger and can do the
12 job better.

13 MR. KEIL: Let's take a five-minute
14 break. We may be just about done.

15 (Recess taken from 4:33 p.m. to
16 4:38 p.m.)

17 EXAMINATION BY

18 MR. KEIL:

19 Q. Who is Joanne Reed?

20 A. Joanne Reed was a temporary social
21 worker who was hired to help me.

22 Q. Was that the temporary social
23 worker you referred to earlier?

24 A. Yes.

25 Q. That would be available after you

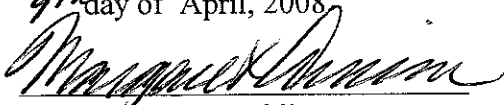
ERRATA

I, Carole Newmark, do hereby certify that I have read the foregoing transcript of the deposition given by me on the 5th day of March 2008, and that it is a true and accurate record of the testimony given by me, except for the following corrections I believe should be made.

PAGE	LINE	READS	SHOULD READ
29	25	Cathy & Ms. Magone	Me & Ms. Magone
77	19	Cathy	Kathy Anderson
80	19	To	No
86	24	I took myself off it	I asked Dr. Page to wear me off it
97	3	It was \$439 over a per.	It was \$439 per wk. over a per....
123	7	required over a yr. period	within a one yr. period
143	23	pt. opportunities	pt. units
153	25	to do the job of work	to do the job.
165	13	to write	to right
165	16	to write	to right
167	25	he could	I could
195	16	biosocial on them	biopsychosocial on them
204	13	I had	She had
222	14	something excellence	Service Excellence
87	11	1 or 2 months after	8 days after
87	1920	Maybe 2 months	4 months
88	23	two month	3 month


Carole Newmark

Sworn to before me this
9th day of April, 2008.


Notary Public

MARGARET ARNIM
Notary Public, State of New York
No. 4922623
Qualified in Westchester County
Commission Expires May 8, 2010